

CITY OF MENOMONIE  
**SOUND AMPLIFYING EQUIPMENT REGISTRATION STATEMENT & PERMIT**

1. Name and home address of applicant: \_\_\_\_\_  
Phone number: Home ( ) \_\_\_\_\_; Work ( ) \_\_\_\_\_  
Email address of applicant: \_\_\_\_\_
2. Address of place of business of applicant: \_\_\_\_\_
3. Name and address of the person who owns the sound amplifying equipment: \_\_\_\_\_  
\_\_\_\_\_
4. Names and address of the person having direct charge of the sound amplifying equipment: \_\_\_\_\_  
\_\_\_\_\_
5. Names and addresses of all persons who will use or operate the sound amplifying equipment: \_\_\_\_\_  
\_\_\_\_\_
6. The purpose for which the sound amplifying equipment will be used: \_\_\_\_\_  
\_\_\_\_\_
7. Name of city park and area within the city park to be used: \_\_\_\_\_  
\_\_\_\_\_
8. The proposed days and hours of operation of the sound amplifying equipment:  
**(Only permitted from 10:00 a.m. to 10:00 p.m.)** \_\_\_\_\_
9. A general description of the sound amplifying equipment to be used: \_\_\_\_\_  
\_\_\_\_\_
10. I agree to comply with the following sound restriction: The sound pressure level cannot exceed 95db at a distance of 35 meters from the source, using the "A" weighting scale.

Fee: \$15.00 per day

Receipt # \_\_\_\_\_

Account #01.43410

\_\_\_\_\_  
Signature of Applicant

I, Cally L. Lauersdorf, Clerk of the City of Menomonie do hereby certify that the above is a true and correct copy of the sound amplifying equipment registration statement on file in my office in accordance with Title 7, Chapter 4, Section 2 of the City Code and a permit is hereby issued for same.

Authorized area: \_\_\_\_\_

Date: \_\_\_\_\_

Dated this \_\_\_\_ day of \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
Cally L. Lauersdorf, City Clerk